Case 2:13-bk-55354 Doc 48-1 Filed 01/10/17 Entered 01/10/17 10:32:26 Desc Exhibit Page 1 of 4

Fill in this informa	ation to identify your c	ase:							
Debtor 1	Kristan Kinz	rie							
Debtor 2 (Spouse, if filing)									
United States Ba	nkruptcy Court for the	: SOUTHERN DISTRIC	T OF OHIO						
Case number	2:13-bk-55354					Check if this is:			
(If known)						■ An amende	d filing		
								ving postpetition chapter	
Official Fo	rm 1061					13 income	as or the	e following date:	
						MM / DD/ Y	YYY		
	: I: Your Inc	OME sible. If two married peo						12/1	
attach a separate		r spouse is not filing wi On the top of any addition							
1. Fill in your information	employment ı.		Debtor 1			Debtor 2	Debtor 2 or non-filing spouse		
attach a separa information abo	more than one job,	Employment status	☐ Employed			■ Empl	oyed	yed	
	arate page with about additional	Employment status	■ Not employed			☐ Not e	mployed	d	
employers.		Occupation				Car Sal	esman	1	
Include part self-employe	-time, seasonal, or ed work.	Employer's name				Jim Ke	im For	d	
	may include student ker, if it applies.	Employer's address				5575 Ko Columb	-	1 43228	
		How long employed to	nere?				years		
Part 2: Giv	ve Details About Mor	nthly Income							
Estimate monthly spouse unless you		ate you file this form. If y	you have nothing to re	eport for	any l	line, write \$0 in the	space.	Include your non-filing	
	filing spouse have mo h a separate sheet to	ore than one employer, co	ombine the information	n for all e	emplo	oyers for that perso	n on the	e lines below. If you need	
						For Debtor 1		Debtor 2 or filling spouse	
		ry, and commissions (becalculate what the month)		2.	\$	0.00	\$	3,333.42	
3. Estimate ar	nd list monthly overt	ime pay.		3.	+\$	0.00	+\$_	0.00	

0.00

3,333.42

4. Calculate gross Income. Add line 2 + line 3.

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Deb	tor 1	Kristan Kinzie	_	C	ase number (if known)	2:13	-bk-553	54	
					For Debtor 1	For	Debtor	2 or	
							-filing s	<u>. </u>	
	Сор	y line 4 here	4.	,	\$0.00	\$	3,	333.42	_
5.	List	all payroll deductions:							
	5a.	Tax, Medicare, and Social Security deductions	5a.		\$	\$		672.06	_
	5b.	Mandatory contributions for retirement plans	5b.		\$0.00	\$		100.01	_
	5c.	Voluntary contributions for retirement plans	5c.		\$0.00	\$		0.00	_
	5d.	Required repayments of retirement fund loans Insurance	5d.		\$	\$_		0.00	_
	5e. 5f.	Domestic support obligations	5e. 5f.		\$	\$_ \$		177.93 0.00	_
	5g.	Union dues	5g.		\$ 0.00	\$ 		0.00	_
	5h.	Other deductions. Specify: Charity	5h.		\$ 0.00	· ·		8.32	
		Ch 13 Bankruptcy	_		\$ 0.00	\$		509.99	_
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	\$		\$		468.31	_
7.	Calc	culate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$	\$ 0.00	\$	1,	865.11	
8.	List 8a.	all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a.	;	\$ 0.00	\$		0.00	_
	8b.	Interest and dividends	8b.	,	\$ 0.00	\$		0.00	
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c.		\$	\$		0.00	
	8d.	Unemployment compensation	8d.		\$ 331.00	\$		0.00	_
	8e.	Social Security	8e.	,	\$	\$		0.00	_
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	e 8f.	;	\$ 0.00	\$		0.00	
	8g.	Pension or retirement income	8g.	;	\$ 0.00	\$		0.00	_
	8h.	Other monthly income. Specify:	8h	+ 3	\$	+ \$		0.00	_
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	331.00	\$		0.0	0
10	Cole	aulata manthly income. Add line 7 . line 0	10. \$	<u> </u>	331.00 + \$		OCE 44	= \$	0.400.44
10.		culate monthly income. Add line 7 + line 9. the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10.	₽	331.00 + \$_	1,0	365.11	= • -	2,196.11
11.	Stat Inclu	te all other regular contributions to the expenses that you list in <i>Schedule</i> ude contributions from an unmarried partner, members of your household, your price friends or relatives. not include any amounts already included in lines 2-10 or amounts that are not	deper			,	Schedule 11.		0.00
12.		the amount in the last column of line 10 to the amount in line 11. The rese that amount on the Summary of Schedules and Statistical Summary of Certainies					. 12.	\$	2,196.11 ned
									ly income
13.	Do y ■	you expect an increase or decrease within the year after you file this form No. Yes. Explain:	?						

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Fill	in this informa	tion to identify yo	our case:									
Deb	tor 1	Kristan Kinz	rie			Che	eck if this is: An amended filing					
Debtor 2 (Spouse, if filing)							An amerided filling A supplement showing postpetition chapter 13 expenses as of the following date:					
Unit	ed States Bankr	ruptcy Court for the	: SOUTH	IERN DISTRICT OF OHIO			MM / DD / YYYY					
	e number	13-bk-55354										
Of	fficial Fo	rm 106J				'						
So	chedule	J: Your	Exper	ises				12/15				
info	rmation. If m		eded, atta	. If two married people ar ich another sheet to this n.								
Par		ibe Your House	ehold									
1.	■ No. Go to	line 2.	in a aanar	ata haysahaldQ								
	□N	0	·	ate household? ial Form 106J-2, Expenses	for Separate House	ehold of De	btor 2.					
2.	Do you have	e dependents?	□ No									
	Do not list Debtor 2.	ebtor 1 and	■ Yes.	Fill out this information for each dependent	Dependent's relati Debtor 1 or Debto		Dependent's age	Does dependent live with you?				
	Do not state				Child		9	□ No				
	dependents	names.			Ciliid			■ Yes □ No				
								Yes				
								□ No □ Yes				
								□ No				
								☐ Yes				
3.	expenses of	enses include f people other t d your depende	han _	No Yes								
exp	imate your ex		our bankr	ly Expenses uptcy filing date unless y y is filed. If this is a supp								
the		n assistance an		government assistance i cluded it on <i>Schedule I:</i>)			Your exp	enses				
4.		or home owners		uses for your residence. I or lot.	nclude first mortgage	e 4.	\$	650.00				
	If not includ	led in line 4:										
		estate taxes				4a.	\$	0.00				
		rty, homeowner's	s, or rente	's insurance		4a. 4b.		0.00				
	4c. Home	maintenance, re	epair, and	upkeep expenses		4c.	\$	50.00				
-		owner's associa			ma aguitu la ara	4d.		0.00				
5.	Additional r	ποrτgage paym	ents for y	our residence, such as ho	me equity loans	5.	Φ	0.00				

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CDIO	1 Kristan Kinzie	Case num	ber (if known)	2:13-bk-55354
. ι	Itilities:			
	a. Electricity, heat, natural gas	6a.	\$	225.00
6	b. Water, sewer, garbage collection	6b.	\$	40.00
6	c. Telephone, cell phone, Internet, satellite, and cable services	6c.	\$	225.00
6	d. Other. Specify:	6d.	\$	0.00
F	ood and housekeeping supplies	7.	\$	550.00
. (childcare and children's education costs	8.	\$	0.00
(Clothing, laundry, and dry cleaning	9.	\$	100.00
). F	ersonal care products and services	10.	\$	100.00
1. N	ledical and dental expenses	11.	\$	100.00
	ransportation. Include gas, maintenance, bus or train fare.			050.00
	o not include car payments.	12.	·	350.00
	ntertainment, clubs, recreation, newspapers, magazines, and books	13.	\$	100.00
	charitable contributions and religious donations	14.	\$	0.00
	nsurance.			
	no not include insurance deducted from your pay or included in lines 4 or 20. 5a. Life insurance	15a.	\$	0.00
	5b. Health insurance	15a. 15b.	· .	0.00
	5c. Vehicle insurance	15b.	· .	
	5d. Other insurance. Specify:	15d.	\$	120.00
	axes. Do not include taxes deducted from your pay or included in lines 4 or 20.		Ψ	0.00
	pecify:	16.	\$	0.00
	nstallment or lease payments:		•	
	7a. Car payments for Vehicle 1	17a.	·	0.00
	7b. Car payments for Vehicle 2	17b.	•	0.00
	7c. Other. Specify:	17c.	•	0.00
	7d. Other. Specify:	17d.	\$	0.00
	our payments of alimony, maintenance, and support that you did not report a educted from your pay on line 5, <i>Schedule I, Your Income</i> (Official Form 106I)		\$	0.00
	Other payments you make to support others who do not live with you.	,-	\$	0.00
	pecify:	19.	·	0.00
	other real property expenses not included in lines 4 or 5 of this form or on Sci	hedule I: Yo	ur Income.	
	0a. Mortgages on other property	20a.		0.00
2	0b. Real estate taxes	20b.	\$	0.00
2	0c. Property, homeowner's, or renter's insurance	20c.	\$	0.00
2	0d. Maintenance, repair, and upkeep expenses	20d.	\$	0.00
2	0e. Homeowner's association or condominium dues	20e.	\$	0.00
1. (Other: Specify:	21.	+\$	0.00
<u>2</u> . (alculate your monthly expenses			
	2a. Add lines 4 through 21.		\$	2,610.00
	2b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2	2	\$,
			\$	2,610.00
2	2c. Add line 22a and 22b. The result is your monthly expenses.			· · · · · · · · · · · · · · · · · · ·
2				
2 2 3. (2c. Add line 22a and 22b. The result is your monthly expenses. *alculate your monthly net income. 3a. Copy line 12 (your combined monthly income) from Schedule I.	23a.	\$	2.196.11
2 2 3. (Calculate your monthly net income. 3a. Copy line 12 (your combined monthly income) from Schedule I.	23a. 23b.		2,196.11 2.610.00
2 2 3. (alculate your monthly net income.			2,196.1 ⁻ 2,610.00
2 2 3. (2	Calculate your monthly net income. 3a. Copy line 12 (your combined monthly income) from Schedule I.			

Ш	No.
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■ Yes. Explain here: **Debtor's residence is in her spouse's name only.**